

## Emergency Option Form

For rating purposes only

Use this form to report decreases or increases in total wages for each quarter affected by government mandates such as: increases in wages due to providing essential services, layoffs, unpaid leave for mandatory or self-imposed quarantine.

(1) Quarter end	(2) Total quarterly wages as reported on your contribution report for quarters listed in Column (1)	(3) Total quarterly wages that would have been reported if there was no mandate	(4) Adjusted total quarterly wages <small>SHADED AREA FOR DEPARTMENTAL USE ONLY</small>
March 31, 2020			
June 30, 2020			
September 30, 2020			
December 31, 2020			

Explanation of how you arrived at the amount: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Account No:** \_\_\_\_\_ **Account Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Contact Person:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_